PART B - FEE(S) TRANSMITTAL

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

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APPLICATION N	O. FILIN	FILING DATE FI		RST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/575,867	06/2	06/26/2007 João Lui		Marques Pereira MONTEIRO		RO	Q93459		3819		
TITLE OF INVENTION: MULTITAXIAL UNIVERSAL TESTING MACHINE											
APPLN, TYPE	APPLN, TYPE SMALL ISSUE FEE		FEE	PUBLICAT	ION PRE	PREV. PAID ISSUE FEE		TOTAL FEE	(S)	DATE DUE	
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nonprovisional	YES	\$755.00		\$300.00		\$0.00		\$1,055.00		02/17/2009	
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EXAMINER				ART UNI	т с	CLASS-SUBCLASS					
Octavia L DAVIS				2855	2855						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363 2. For printing on the patent front page list 1 Sughrue Mion, PLLC											
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.						(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2					
□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev (2) the name of								• ,			
03-02 or more recent) ATTACHED. Use of a Customer Number is required.						member a registered attorney or agent) and the 3					
					names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be						
						printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)											
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
UNIVERSIDADE DO MINHO Braga, Portugal											
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government											
4a. The following fee(s) are submitted:				•	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.						
☑ Issue Fee ☑ Publication Fee (No small entity discount permitted)					Payment by credit card. Form 1310-2038 is attached.						
					☐ Fayment by credit card. Form 1510-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any						
					erpayment, to Deposit Account Number 19-4880.						
					The USPTO is directed and authorized to charge all required fees to Deposit Account No. 4880. Please also credit any overpayments to said Deposit Account.						
	(6			<u>19-4880</u> . I	Please also cr	redit ai	ny overpayments to	o said Deposit A	count.		
5. Change in Entity Sta			ED 1 07	□ L. A 12	iaamt ia ma land	m.com.ol	laimina SMALL E	NTITY atotus C	27 CE	P 1 27(~)(2)	
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.											
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NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.											
Authorized Signature		/Alan J. Kaspe	r/		Date			February	13 2009		
Addionzed Signature			· ·		·			- Columny	. 3, 2007		
Typed or Printed Name	2	Alan J. Kasper			Registration	on No.		25,426			
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